

**महाराष्ट्र शासन  
सार्वजनिक आरोग्य विभाग**

शासन आदेश क्रमांक: मफुयो-२०१८/प्र.क्र.२२१/आरोग्य-६

गो. ते. रुग्णालय आवार संकुल इमारत

नवीन मंत्रालय, मुंबई - ४००००९

दिनांक : ३० नोव्हेंबर, २०१८

**संदर्भ :-** राष्ट्रीय आरोग्य अभिकरण, आरोग्य व कुटुंब कल्याण मंत्रालय, भारत सरकार, नवी दिल्ली यांचे दिनांक ३०.०८.२०१८ चे परिपत्रक

**शासन आदेश :-**

विषयांकित प्रकरणी आयुष्यमान भारत - प्रधानमंत्री जन आरोग्य योजने संदर्भातील नॅशनल हेल्थ एजन्सी, आरोग्य व कुटुंब कल्याण मंत्रालय, भारत सरकार, नवी दिल्ली यांचे दिनांक ३०.०८.२०१८ चे परिपत्रकानुसार सामाजिक - आर्थिक व जाती गणनेमधील सर्वेक्षण (SECC Data), २०११ नुसार प्रधानमंत्री जन आरोग्य योजनेचा लाभ नोंदीत लाभार्थ्यांना अनुज्ञेय आहे. सदर परिपत्रकातील निकषानुसार अपात्र लाभार्थी आपोआपच वगळण्यात आलेला आहे. मात्र, पात्रता यादीमध्ये अपात्र लाभार्थ्यांचा समावेश झाला असल्यास अशा प्रकरणी अपात्र ठरलेल्या लाभार्थ्यांची नावे पात्रतेच्या यादीमधून कमी करण्यासाठी व लाभार्थ्यांची यादी निश्चित करण्यासाठी केंद्र शासनाच्या दिनांक ३०.०८.२०१८ च्या परिपत्रकानुसार (प्रत संलग्न) संबंधित जिल्ह्यांचे जिल्हाधिकारी तथा जिल्हादंडाधिकारी यांना या आदेशाद्वारे प्राधिकृत करण्यात येत आहे.

२. सदरील प्रत्येक प्रकरणी केंद्र शासनाच्या सोबत जोडलेल्या मार्गदर्शक सुचनानुसार (Guidelines) व परिपत्रकानुसार रितसर चौकशीची कार्यवाही करण्याची दक्षता घेण्यात यावी.

३. सदर शासन आदेश महाराष्ट्र शासनाच्या [www.maharashtra.gov.in](http://www.maharashtra.gov.in) या संकेतस्थळावर उपलब्ध करण्यात आला असून त्याचा संकेतांक 201812011435524217 असा आहे. हा आदेश डिजीटल स्वाक्षरीने साक्षांकित करून काढण्यात येत आहे.

महाराष्ट्राचे राज्यपाल यांच्या आदेशानुसार व नावाने,

(सु.नि. गाडगे)

कार्यासन अधिकारी, महाराष्ट्र शासन

प्रत,

१. मा. राज्यपाल यांचे सचिव, राजभवन, मुंबई

२. मा. मुख्यमंत्री यांचे प्रधान सचिव, मंत्रालय, मुंबई

३. मा मंत्री (सा.आ.व कु.क.) यांचे खाजगी सचिव, मंत्रालय मुंबई
४. मा राज्यमंत्री (सा.आ.व कु.क.) यांचे खाजगी सचिव, मंत्रालय, मुंबई
५. मुख्य सचिव, महाराष्ट्र राज्य, मंत्रालय, मुंबई
६. मुख्य कार्यकारी अधिकारी, राष्ट्रीय आरोग्य अभिकरण (NHA), आरोग्य व कुटुंब कल्याण मंत्रालय, भारत सरकार, निर्माण भवन, नवी दिल्ली- ११००११
७. अपर मुख्य सचिव (वित्त /नियोजन) विभाग, मंत्रालय, मुंबई-३२
८. प्रधान सचिव, सार्वजनिक आरोग्य विभाग, मंत्रालय, मुंबई -३२
९. प्रधान सचिव, वैद्यकीय शिक्षण व औषधी द्रव्ये विभाग, मंत्रालय, मुंबई
१०. प्रधान सचिव, अन्न नागरी पुरवठा व ग्राहक संरक्षण विभाग, मंत्रालय, मुंबई -३२
११. आयुक्त, आरोग्य सेवा तथा अभियान संचालक, राष्ट्रीय आरोग्य अभियान, मुंबई-०१
१२. विभागीय आयुक्त (सर्व)
१३. आयुक्त, महानगरपालिका (सर्व)
१४. मुख्य कार्यकारी अधिकारी, राज्य आरोग्य हमी सोसायटी, वरली, मुंबई
१५. जिल्हाधिकारी (सर्व)
१६. मुख्य कार्यकारी अधिकारी, जिल्हा परिषद (सर्व)
१७. संचालक, आरोग्य सेवा, आरोग्य सेवा संचालनालय, मुंबई -०१
१८. निवड नस्ती (आरोग्य-६)

Government of India  
Ministry of Health & Family Welfare  
National Health Agency

Nirman Bhawan, New Delhi  
Dated: 30<sup>th</sup> August, 2018

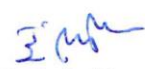
**CIRCULAR**

Subject: Regarding authorizing DC/DMs to implement exclusion clauses in SECC Data.

Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana is targeted to benefit 10.74 crore poor, deprived rural families and identified occupational category of urban workers' families as per the Socio Economic Caste Census (SECC) 2011. The SECC 2011 is a study of socio economic status of rural and urban households that allows ranking of households based on predefined parameters. It was conducted under the overall coordination of Department of Rural Development. The data is based on 2011 SECC Census riding over National Population Register demographics. As per the SECC 2011, the following beneficiaries are automatically excluded:

- i. Households having motorized 2/3/4 wheeler/fishing boat.
- ii. Households having mechanized 3/4 wheeler agricultural equipment
- iii. Households having Kisan Credit Card with credit limit above Rs. 50,000.
- iv. Household member is a Government employee.
- v. Households with non-agricultural enterprises registered with Government.
- vi. Any member of household earning more than 10,000 per month.
- vii. Households paying income tax.
- viii. Households paying professional tax.
- ix. House with three or more rooms with pucca walls and roof.
- x. Owns a refrigerator
- xi. Owns a landline phone.
- xii. Owns more than 2.5 acres of irrigated land with 1 irrigation equipment.
- xiii. Owns 5 acres or more of irrigated land for two or more crop season
- xiv. Owning at least 7.5 acres of land or more with at least one irrigation equipment.

2. This study was conducted in 2011, an additional data collection drive was undertaken to update family data. However, there may still be some glaring instances, where some of those who have to be automatically excluded in 2011 but are figuring in the list of eligible beneficiaries. In such cases, State are advised to authorize the District Collectors/District Magistrates or Deputy Commissioners to exclude such beneficiaries from the eligibility list. This should be done on the basis of written representation and after due summary inquiry is conducted into each particular case.

  
(Dr. Indu Bhushan)  
Chief Executive Officer  
National Health Agency

To All Chief Secretaries of States



AYUSHMAN BHARAT  
PRADHAN MANTRI JAN AROGYA YOJANA  
BRANDING GUIDELINES

## 1. Introduction

### a. Overview of the Mission

Ayushman Bharat : India's commitment to Universal Health Coverage

- Ayushman Bharat is a fundamental restructuring of the manner in which beneficiaries access healthcare services at the primary, secondary and tertiary care levels. It represents a transition from segmented, sectoral and fragmented program implementation models towards a comprehensive, holistic, need-based healthcare system.
- Ayushman Bharat encapsulates a progression towards promotive, preventive, curative, palliative and rehabilitative aspects of Universal Healthcare through access of Health and Wellness Centers (HWCs) at the primary level and provisioning of financial protection for accessing curative care at the secondary and tertiary levels through engagement with both public and private sector.

### **Ayushman Bharat- Pradhan Mantri Jan Arogya Yojana (PMJAY)**

- 71st Round of National Sample Survey Organization (NSSO) has found 85.9% of rural households and 82% of urban households have no access to healthcare insurance/assurance.
- More than 17% of Indian population spend at least 10% of household budgets for health services. Catastrophic healthcare related expenditure pushes families into debt, with more than 24% households in rural India and 18% population in urban area have met their healthcare expenses through some sort of borrowings.
- Approximately 10.74 crore identified families (approximately 50 crore beneficiaries) will be entitled to get the benefits.
- There is no cap on family size and age as well as restriction on preexisting conditions.
- PMJAY will help reduce out of pocket hospitalisation expenses, fulfil unmet needs and improve access of identified families to quality inpatient care and day care surgeries
- PMJAY will provide a coverage up to Rs. 5,00,000 per family per year, for secondary and tertiary care hospitalization through a network of Empaneled Health Care Providers (EHCP).
- The EHCP network will provide completely cashless and paperless access to services for the beneficiaries at the both public and private hospitals. The services will include 1350 procedures covering pre and post hospitalization, diagnostics, medicines etc.
- PMJAY beneficiaries will be able to move across borders and access services across the country through the provider network seamlessly.
- The scheme is entitlement based. No formal enrolment process is required.
- PMJAY will target poor, deprived rural families and identified occupational category of urban workers' families as per the latest Socio-Economic Caste Census (SECC) 2011 data, both rural and urban. Additionally, all such enrolled families under Rashtriya Swasthya Bima Yojana (RSBY) that do not feature in the targeted groups as per SECC data will be included as well.

- The categories in rural and urban that will be covered under PMJAY are given as follows:

For Rural:

- Total deprived Households targeted for PMRSSM who belong to one of the six deprivation criteria amongst D1, D2, D3, D4, D5 and D7:
- Only one room with kucha walls and kucha roof (D1)
- No adult member between age 16 to 59 (D2)
- Female headed households with no adult male member between age 16 to 59 (D3)
- Disabled member and no able-bodied adult member (D4)
- SC/ST households (D5)
- Landless households deriving major part of their income from manual casual labour (D7)

Automatically included:

- Households without shelter
- Destitute/ living on alms
- Manual scavenger families
- Primitive tribal groups
- Legally released bonded labour

For Urban:

- Occupational Categories of Workers
- Rag picker
- Beggar
- Domestic worker
- Street vendor/ Cobbler/hawker / Other service provider working on streets
- Construction worker/ Plumber/ Mason/ Labour/ Painter/ Welder/ Security guard/
- Coolie and another head-load worker
- Sweeper/ Sanitation worker / Mali
- Home-based worker/ Artisan/ Handicrafts worker / Tailor
- Transport worker/ Driver/ Conductor/ Helper to drivers and conductors/ Cart puller/ Rickshaw puller
- Shop worker/ Assistant/ Peon in small establishment/ Helper/Delivery assistant / Attendant/ Waiter
- Electrician/ Mechanic/ Assembler/ Repair worker
- Washer-man/ Chowkidar

As per the SECC 2011, the following beneficiaries are automatically excluded:

- Households having motorized 2/3/4 wheeler/fishing boat
- Households having mechanized 3/4 wheeler agricultural equipment
- Households having Kisan Credit Card with credit limit above Rs. 50,000/-
- Household member is a government employee
- Households with non-agricultural enterprises registered with government
- Any member of household earning more than Rs. 10,000/- per month
- Households paying income tax

- Households paying professional tax
- House with three or more rooms with pucca walls and roof
- Owns a refrigerator
- Owns a landline phone
- Owns more than 2.5 acres of irrigated land with 1 irrigation equipment
- Owns 5 acres or more of irrigated land for two or more crop season
- Owning at least 7.5 acres of land or more with at least one irrigation equipment

There may still be some glaring instances, where some of those who have to be automatically excluded in 2011, are figuring in the list of eligible beneficiaries. In such cases, states are advised to authorize the District Collectors/ District Magistrates or Deputy Commissioners to exclude such beneficiaries from the eligible list.

#### **b. Purpose of the brand guidelines**

Effective implementation of the Information, Education and communication (IEC) strategy is one of the key criteria to the success of PMJAY. IEC activities are important to spread awareness and knowledge of the Yojana.

Branding is an essential element to communication, as it creates a common and easily recognizable visual identifier which beneficiaries can recall. A common visual can transcend all borders of written and read text across different languages. This visual identity is the one with which people will associate the Yojana.

These guidelines have been developed to help States/UTs/SHAs, departments and agencies ensure that the logos are consistently and appropriately applied to various communication and media products.

It is hence necessary to ensure clear and consistent usage of the brand across government departments and agencies. All departments, agencies and any other bodies using or implying to use any branding material of PMJAY are required to comply with these branding guidelines. The specifications on appropriate usage are detailed in the sections below. These brand guidelines are for the use of personnel responsible for communication or graphic designers or professional printers, who are producing content for the Yojana. This document lays down standard guidelines and practices for the use of the logos. The handbook ensures a consistent and cohesive visual identity for PMJAY.

## 2. Logos to be used

### a. Ministry of Health and Family Welfare (MoHFW)

The logo of MoHFW is to be used:

English:

MoHFW (both options can be used)



In Hindi:

MoHFW: both options can be used



### b. National Health Agency (NHA) logo

At the central level, the National Health Agency (NHA) has been established, as a society under the Ministry of Health and Family Welfare, as the nodal point for policy design, facilitating implementation and monitoring of the Scheme. NHA will provide full support and leadership of the Yojana and has issued detailed operational guidelines as guiding posts for the Scheme to the States. NHA will continue to engage productively with the States to enhance their capacities.

The logo of NHA to be used:



In English:

In Hindi:



- This is the only version of the NHA logo
- 'National Health Agency' should be written on the Right Hand Side of the Ashoka Emblem. It should not be written below the Ashoka emblem
- The logo of NHA is only in Black & White
- NHA logo should not be used with any colour renditions

### c. Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (PMJAY) logo

The logo of PMJAY to be used:

In English:

In Hindi:



To ensure the integrity and visibility of the logo, a minimum clearance between the logo and other elements must be maintained. The visual identity should be kept clear of competing text, images other graphic elements. There must be adequate clear space surrounding the identity on all four sides.

### 3. Co-branding

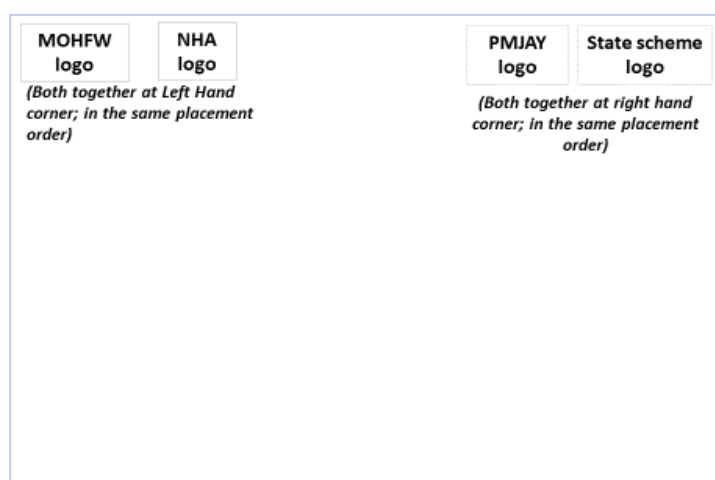
#### a. Name of the Scheme to be used:

- Since it is a national scheme, name of national scheme shall be followed by the name of the State scheme. An example is as follows:

Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (PMJAY) in alliance with Mukhya Mantri Swashtya Bima Yojana (MSBY)

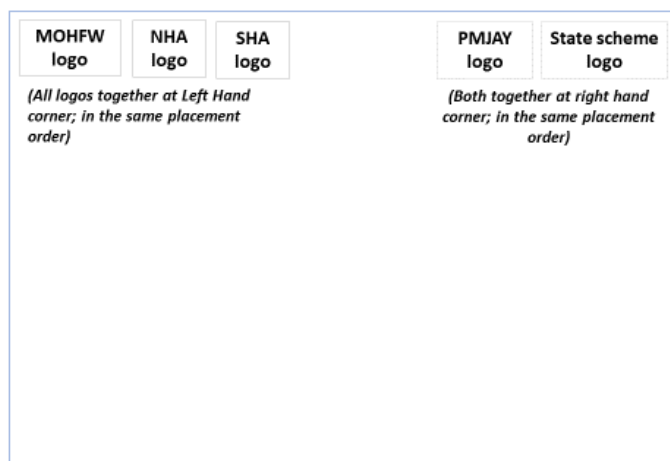
- b. **Co-branding on the E-card Fascia** that will be provided to each of the beneficiaries:
- Logos of Government of India (MoHFW), NHA, PMJAY and State Scheme.
  - Names of both PMJAY and State Scheme.
  - Toll Free Number of PMJAY and State scheme (if any).
  - Size of logos and fonts for Government of India, NHA, PMJAY and State logos will be of equal size.
  - The 3 logos of MoHFW, NHA, PMJAY will be in one language – all 3 logos are in English or all 3 logos are in Hindi. It should preferably be in Hindi.
- c. **Co-branding in all Information, Education & Communication (IEC) materials:**
- All the communication sent by the states will have 4 logos: logo of Government of India (MoHFW), NHA, PMJAY and State Government Scheme.
  - All the 4 logos will be placed at the top of the page.
  - Names of both PMJAY and State Scheme where PMJAY shall appear before State scheme
  - The 3 logos of MoHFW, NHA, PMJAY will be in one language – all 3 logos are in English or all 3 logos are in Hindi.
  - PMJAY logo can be translated in state specific languages, as required.
  - States may want to use a regional language, especially for state scheme name.
  - No name of any political party should be placed in the IEC materials.
- d. **Placement of the logos in all co-branded material** (including IEC material and e-cards):
- The placement of the logos will be as per the template given below:

#### Logo placements



If the states also want to insert a State government/ SHA logo, that logo should be on the right-hand side of the NHA logo

#### Logo placements: Option



#### e. Files of the various logos to be used:

- The jpgs of the logos (in English and Hindi) given above are for reference only
- Only the artwork files are to be used for printing.
- The artwork files are uploaded on the [www.abnhpm.gov.in](http://www.abnhpm.gov.in) site in the IEC materials section

#### 4. Usage guidelines for departments and agencies for NHA and PMJAY logos only.

**Note: For Ministry of Health and Family Welfare (MoHFW) logo, please follow the MoHFW's guidelines**

#### a. Use of NHA and PMJAY logos will be allowed without any prior permission for the following categories:

- All establishments, offices and officers of NHA, Government of India.
- All Central Government Ministries/Departments and Departments of State.
- State Governments/UT Administrations for use in programmes directly organized by them.
- The use of NHA and PMJAY by Indian Embassies/Missions abroad will be permissible for events, brochures, publicity material and advertisements that promote the Yojana and are sponsored/supported by the Embassies/Missions.

#### b. For the following events, use of the NHA and PMJAY logos may be allowed with prior approval of the NHA; Government of India:

- All events for which financial support or sponsorships are extended by the 'Pradhan Mantri Jan Arogya Yojana', Government of India.

- ii. For a specified period, for events organized by private bodies that promote 'Pradhan Mantri Jan Arogya Yojana'.

**c. Use of logo for programmes on Electronic Media**

- i. Requests received for use of NHA and PMJAY logos for programmes on electronic media, such as debates, discussions or any other would be considered on merit of each case, keeping in view the following:
  - a. Nature of the programme
  - b. Profile and track record of the producers of the programme
  - c. The target audience
  - d. Contents of the programme and inclusion of healthcare and insurance related content covered in the programme
  - e. Extent to which the programme would help in increasing awareness of Pradhan Mantri Jan Arogya Yojna
- d. Permission accorded by NHA, Govt. of India, for use of NHA and PMJAY logos would be subject to the right of NHA to withdraw permission for use of NHA and PMJAY logos.
- e. These guidelines will supersede all earlier guidelines issued on the subject; and all permissions for use of the logo granted earlier which do not conform to these guidelines shall stand cancelled.

**5. Proposed list of IEC activities to be carried out by the State/UT**

**COLLATERALS**

- Banners
- Brochures, leaflets, pamphlets, handbills
- Standees
- Backdrops
- Pamphlets

**COMMUNICATION AT EMPANELED HOSPITALS**

- Arogya Mitra uniform
- Kiosk
- Hospital enrolment certificate
- Hoarding at the empaneled hospital
- Standees giving details to beneficiaries
- Leaflet/pamphlet/handbill that they can give the beneficiaries
- Certification for empaneled hospitals

**OOH ADVERTISING**

- Hoardings at prominent places such as airport, railway stations, bus stops, highways, key roads, market areas etc
- Panels: bus/metro/railway/ auto/ airport etc

- Bus Stops
- Railway stations
- Digital Vans
- Wall painting

#### **MEDIA COVERAGE**

- TV spots
- Radio Spots
- WhatsApp/mobile sms: films/animation
- Newspaper/Magazine Advertisements
- Website Videos/Tickers
- Cinema slides

#### **OTHER MEDIUM**

- Handbills
- ID Cards
- Giveaways (if any, such as notepads, pens etc.)
- Calendar
- Coffee Table Book (If any)

#### **PUBLIC ENGAGEMENT ACTIVITIES**

- Kiosks/canopy at Haat
- Nukkad naatak/puppet show
- Village/panchayat meets
- Participation to create awareness in health related activities like health melas, health camps and specific health days etc
- Slum activities
- Organization of mass rally
- Exhibitions